

# Index of Claims



Application No.

09/934,994

Examiner

LaShonda T. Jacobs

Applicant(s)

SHAPIRA, ELIJAHU

Art Unit

2157

|   |          |
|---|----------|
| R | Rejected |
| = | Allowed  |

|   |                                |
|---|--------------------------------|
| — | (Through numeral)<br>Cancelled |
| ÷ | Restricted                     |

|   |              |
|---|--------------|
| N | Non-Elected  |
| I | Interference |

|   |          |
|---|----------|
| A | Appeal   |
| O | Objected |

| Claim |          | Date     |         |          |         |  |  |  |  |  |  |
|-------|----------|----------|---------|----------|---------|--|--|--|--|--|--|
| Final | Original | 10/14/04 | 5/23/05 | 11/16/05 | 7/18/06 |  |  |  |  |  |  |
|       | 1        | R        | R       | R        | R       |  |  |  |  |  |  |
|       | 2        | R        | R       | R        | R       |  |  |  |  |  |  |
|       | 3        | R        | R       | R        | R       |  |  |  |  |  |  |
|       | 4        | R        | R       | R        | R       |  |  |  |  |  |  |
|       | 5        | R        | R       | R        | R       |  |  |  |  |  |  |
|       | 6        | R        | R       | R        | R       |  |  |  |  |  |  |
|       | 7        | R        | R       | R        | R       |  |  |  |  |  |  |
|       | 8        | R        | R       | R        | R       |  |  |  |  |  |  |
|       | 9        | R        | R       | R        | R       |  |  |  |  |  |  |
|       | 10       | R        | R       | R        | R       |  |  |  |  |  |  |
|       | 11       | R        | R       | R        | R       |  |  |  |  |  |  |
|       | 12       | R        | R       | R        | R       |  |  |  |  |  |  |
|       | 13       | R        | R       | R        | R       |  |  |  |  |  |  |
|       | 14       |          |         |          |         |  |  |  |  |  |  |
|       | 15       |          |         |          |         |  |  |  |  |  |  |
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|       | 27       |          |         |          |         |  |  |  |  |  |  |
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|       | 49       |          |         |          |         |  |  |  |  |  |  |
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| Claim |          | Date |  |  |  |  |  |  |  |  |  |
|-------|----------|------|--|--|--|--|--|--|--|--|--|
| Final | Original |      |  |  |  |  |  |  |  |  |  |
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|       | 100      |      |  |  |  |  |  |  |  |  |  |

| Claim |          | Date |  |  |  |  |  |  |  |  |  |
|-------|----------|------|--|--|--|--|--|--|--|--|--|
| Final | Original |      |  |  |  |  |  |  |  |  |  |
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|       | 132      |      |  |  |  |  |  |  |  |  |  |
|       | 133      |      |  |  |  |  |  |  |  |  |  |
|       | 134      |      |  |  |  |  |  |  |  |  |  |
|       | 135      |      |  |  |  |  |  |  |  |  |  |
|       | 136      |      |  |  |  |  |  |  |  |  |  |
|       | 137      |      |  |  |  |  |  |  |  |  |  |
|       | 138      |      |  |  |  |  |  |  |  |  |  |
|       | 139      |      |  |  |  |  |  |  |  |  |  |
|       | 140      |      |  |  |  |  |  |  |  |  |  |
|       | 141      |      |  |  |  |  |  |  |  |  |  |
|       | 142      |      |  |  |  |  |  |  |  |  |  |
|       | 143      |      |  |  |  |  |  |  |  |  |  |
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|       | 145      |      |  |  |  |  |  |  |  |  |  |
|       | 146      |      |  |  |  |  |  |  |  |  |  |
|       | 147      |      |  |  |  |  |  |  |  |  |  |
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